PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

100.0100503

CLAIMS AS FILED - PART I							SMALL ENTITY			OTHER THAN		
			(Column 1)		(Column 2)		TYPE		=	OR	SMALL	ENTITY
TOTAL CLAIMS			20		·		RA	TE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASI	C FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			20 minus 20=		* <i>O</i> .		X\$	9=		OR	X\$18=	
INDEPENDENT CLAIMS			3 minus 3 =		* 0		X4	2=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESEI				SENT			+14	10=		OR	+280=	
* If the difference in column 1 is less than zero					r "0" in c	olumn 2	TO	TAL	370	OR	TOTAL	
CLAIMS AS AMENDED - PART II										•	OTHER	
		(Column 1)		(Column		(Column 3) SMAL		ALL	ENTITY	OR	SMALL	ENTITY
ENT A		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
AME	Independent	*	Minus	***	T OL 4144	=	X4	2=		OR	X84=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	CLAIM		+14	10=		OR	+280=	
								OTAL		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)	ADDIT	. rtt			ADDII. FEE	
		(Column 1) CLAIMS			HEST	(Column 3)		-	ADDI-	1	r	ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA	RA	TE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
	Independent	*	Minus	***		-	X4	2=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										+280=	
							+14	OTAL		OR	TOTAL	
							ADDIT			OR	ADDIT. FEE	L
		(Column 1)			mn 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N N	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
ME	Indep ndent	*	Minus	***		=	X4	2=		OR	X84=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									On		
	16 Ab a a = 4 = - 1 = - 1	4 to tour street	iho opi:	umm O ······	n "O" :	lumo 2	+14			OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The "Highest Nur	mber Previously Pa	aid For" (Total	or Independ	dent) is the	e highest number	r found in	the ap	propriate bo	x in co	olumn 1.	